

ISDH 2003 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Morgan Hospital and Health CenterCity: Martinsville County: Morgan Year: **2003**

Provider Type: General Acute

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	8	276	1,258	\$7,175
ICU Med/Surg	0	0	0	\$0
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	70	1,706	6,228	\$2,875
Neonatal Intermed	0	0	0	\$0
Obstetrics	6	234	485	\$3,214
Pediatric	0	0	0	\$0

Psychiatric	0	0	0	\$0
Rehabilitation	0	0	0	\$0
Substance Abuse	0	0	0	\$0
Swing Beds	NA	0	0	\$0
Other Services	0	0	0	NA
Acute Subtotal	84	2,216	7,971	NA
Normal Newborn	10	159	368	\$1,745

II. Outpatient Visits			
Circulatory System	391	Digestive System	1,452
Endocrine System	114	Injuries and Poison	6,166
Mental Disorder	314	Musculoskeletal	298
Neoplasms	390	Nervous	1,625
Respiratory	2,703	Urinary	1,152
Other/Unknown	1,454	Total Visits	16,059
Number of Visits to Emergency Department			20,120
Percent of Emergency Department Visits of Total Visits			125.3%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 41 services. This list of services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment.

N - Acute Renal Dialysis	N - Alcohol/Drug Service	Y - Anesthesia Services
Y - Blood Bank	N - Burn Care Unit	N - Chiropractic Service
Y - Coronary Care Unit	N - Dental Services	Y - Dietetic Services
Y - Emergency Service	Y - Home Care Program	Y - Hospice
Y - Inpatient Surgical Services	Y - Intensive Care Unit	Y - Laboratory(Clinical)
Y - Laboratory(Anatomical)	N - Long Term Care Unit	N - Neonatal Nursery
Y - Nuclear Medicine Services	Y - Obstetrics Services	
Y - Occupational Therapy	N - Open Heart Surgery	Y - Operating Room
N - Optometric Service	N - Organ Bank	N - Organ Transplant
Y - Outpatient Service	Y - Outpatient Surgery Unit	Y - Pediatric Services
Y - Pharmacy	Y - Physical Therapy	Y - Postoperative Recovery
N - Psychiatric Services	Y - Radiology(Diagnostic)	Y - Radiology(Therapeutic)
Y - Rehabilitation Services	Y - Respiratory Services	N - Self Care Unit
N - Shock Trauma	Y - Social Services	Y - Speech Pathology

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
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